## Section 1. **General Description and Purpose of the Children's Health Insurance Plans and the Requirements** 1.1. The state will use funds provided under Title XXI primarily for (Check appropriate box) (Section 2101)(a)(1)); (42 CFR 457.70): Guidance: Check below if child health assistance shall be provided primarily through the development of a separate program that meets the requirements of Section 2101, which details coverage requirements and the other applicable requirements of Title XXI. Obtaining coverage that meets the requirements for a separate child health program 1.1.1. (Sections 2101(a)(1) and 2103); OR Guidance Check below if child health assistance shall be provided primarily through providing expanded eligibility under the State's Medicaid program (Title XIX). Note that if this is selected the State must also submit a corresponding Medicaid SPA to CMS for review and approval. **1.1.2.** Providing expanded benefits under the State's Medicaid plan (Title XIX) (Section 2101(a)(2)); OR **Guidance:** Check below if child health assistance shall be provided through a combination of both 1.1.1. and 1.1.2. (Coverage that meets the requirements of Title XXI, in conjunction with an expansion in the State's Medicaid program). Note that if this is selected the state must also submit a corresponding Medicaid state plan amendment to CMS for review and approval. **1.1.3.** $\boxtimes$ A combination of both of the above. (Section 2101(a)(2)) 1.1- DS The State will provide dental-only supplemental coverage. Only States operating a separate CHIP program are eligible for this option. States choosing this option must also complete sections 4.1-DS, 4.2-DS, 6.2-DS, 8.2-DS, and 9.10 of this SPA template. (Section 2110(b)(5)) 1.2. Check to provide an assurance that expenditures for child health assistance will not be claimed prior to the time that the State has legislative authority to operate the State plan or plan amendment as approved by CMS. (42 CFR 457.40(d)) 1.3. Check to provide an assurance that the State complies with all applicable civil rights requirements, including title VI of the Civil Rights Act of 1964, title II of the Americans with Disabilities Act of 1990, section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, 45 CFR part 80, part 84, and part 91, and 28 CFR part 35. (42CFR 457.130) Guidance: The effective date as specified below is defined as the date on which the State begins to incur costs to implement its State plan or amendment. (42 CFR 457.65) The implementation date is defined as the date the State begins to provide services; or, the date on which the State puts into practice the new policy described in the State plan or amendment. For example, in a State that has increased eligibility, this is the date on which the State begins to provide coverage to enrollees (and not the

1.4. Provide the effective (date costs begin to be incurred) and implementation (date services begin to be provided) dates for this SPA (42 CFR 457.65). A SPA may only have one effective date, but provisions within the SPA may have different implementation dates that must be after the effective date.

date the State begins outreach or accepting applications).

## Original Plan

Effective Date: October 1, 1998
Implementation Date: February 1, 1999

## Subsequent Plan Amendments

State Plan Amendment	Effective Date	Implementation Date	
SPA #1	July 1, 1999		
SPA #2	October 1, 2001	August 1, 2001	
SPA #3	June 12, 2003	Withdrawn – June 12, 2003	
SPA #4	January 1, 2007	October 1, 2009	
SPA #5	April 1, 2009	April 1, 2009	
SPA #6	July 1, 2010	July 1, 2010	
SPA #7	July 1, 2014	July 1, 2014	
SPA # DE-CHIP-16-001	January 1, 2017	January 1, 2017	
SPA # DE-CHIP-17-003	October 2, 2017	October 2, 2017	
SPA # DE-CHIP-18-003	October 12, 2018	October 12, 2018	
SPA # DE-CHIP-19-004	July 1, 2018	July 1, 2018	

## Summary of Approved CHIP MAGI SPAs:

Transmittal Number	SPA Group	PDF#	Description	Superseded Plan Section(s)
DE-13-0012  Effective/ Implementation Date: January 1, 2014	MAGI Eligibility & Methods	CS7	Eligibility – Targeted Low Income Children  MAGI-Based Income Methodologies	Supersedes the current sections Geographic Area 4.1.1; Age 4.1.2; and Income 4.1.3 Incorporate within a separate subsection under section 4.3
DE-13-0013 Effective/ Implementation Date: January 1, 2014	XXI Medicaid Expansion	CS3	Eligibility for Medicaid Expansion Program	Supersedes the current Medicaid expansion section 4.0
DE-13-0016  Effective/ Implementation Date: January 1, 2014	Establish 2101(f) Group	CS14	Children Ineligible for Medicaid as a Result of the Elimination of Income Disregards	Incorporate within a separate subsection under section 4.1
DE-13-0015  Effective/	Non- Financial Eligibility	CS17	Non-Financial Eligibility – Residency	Supersedes the current section 4.1.5
Implementation Date: January 1, 2014		CS18	Non-Financial Eligibility – Citizenship	Supersedes the current sections 4.1.0; 4.1.1-LR; 4.1.1-LR
		CS19	Non-Financial Eligibility – Social Security Number Non-Financial	Supersedes the current section 4.1.9.1
		CS20	Eligibility – Substitution of Coverage	Supersedes the current section 4.4.4
		CS21	Non-Payment of Premiums	Supersedes the current section 8.7

		CS27	Continuous Eligibility	Supersedes the current section 4.1.8
DE-13-0014  Effective/Implementation	Eligibility Processing	CS24	Eligibility Process	Supersedes the current sections 4.3 and 4.4
Date: October 1, 2013				

**1.4- TC Tribal Consultation** (Section 2107(e)(1)(C)) Describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment, when it occurred and who was involved.

Delaware does not have any state or federally recognized Indian tribes. Any Delaware resident, including those who are American Indians or Alaska Natives, may participate in the review of amendments to state law or regulation and may offer comments on all program policies, including those relating to provision of child health assistance to American Indian or Alaskan Native children.

TN No: Approval Date Effective Date